

MRS in North Carolina

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What is the MULTIPLE RESPONSE SYSTEM?

The Multiple Response System (MRS) is an effort by the N.C. Division of Social Services and its county Department of Social Services (DSS) partners to reform the entire continuum of child welfare in North Carolina, from intake through placement services. It was made possible through Session Law 2001-424, Senate Bill 1005 2001, "Appropriations Act of the General Assembly". The legislation required the Department of Health and Human Services, Division of Social Services to develop a plan working with local Departments of Social Services, to implement an alternative response system of child protection in no fewer than two and no more than ten demonstration counties in the state. Ten county Departments of Social Services implemented North Carolina's Multiple Response System demonstration project on August 1, 2002. They include Alamance, Bladen, Buncombe, Caldwell, Craven, Franklin, Guilford, Mecklenberg, Nash, and Transylvania counties. Their population varies from Mecklenburg's 638,000 to Transylvania's 26,000 people. Geographically, they range from Craven with a military base on the coast to Buncombe in the mountains. This diversity offers unique opportunities for counties to serve families and children from every profession, economic status, and cultural heritage.

The Principles of Family Centered Practice

The reform effectuated through the Multiple Response System is founded upon the principles of family-centered practice. These principles are that:

- ❖ Everyone desires respect
- ❖ Everyone needs to be heard
- ❖ Everyone has strengths
- ❖ Judgments can wait
- ❖ Partners share power
- ❖ Partnership is a process

The principles of family-centered practice reflect the belief that the family is its own primary source of intervention and determines who its members are. The family is viewed as a system within a larger social and environmental context. As a result, interventions focus on accessing the family's immediate and extended community in needs assessment, resource identification and service delivery. Family-centered practice respects the family's right of self-control and capabilities; and, assumes they have the capacity to grow and change when provided the proper supportive interventions. Family-centered practice extends into the provision of placement services by involving the family in developing and implementing a plan for reunification, partnering with the foster family in temporary placement; and if necessary, working to preserve the child's placement in a new, permanent adoptive family. Family-centered practice develops strengths, enhances potential, and empowers families to identify and resolve their own problems and achieve safe, permanent, nurturing homes for children.

WHY DO WE NEED MRS IN NORTH CAROLINA?

During the SFY 2001/2002 **107,218 children** were investigated as alleged victims of abuse, neglect, or dependency. Of these, **87%** were for allegations of **neglect** while 12 % concerned abuse and possible criminal misconduct. This means that **107,218** different family situations had to be served using **1** comprehensive and intrusive approach designed to identify victims and perpetrators. In cases of less serious maltreatment in which changes in family relationships and functioning are the best means of securing safety for children, the investigative and labeling approach often has the effect of alienating and discouraging family members. The Division, County Departments of Social Services, and Child Advocates values what is being done in the traditional approach but through research, and the work in other states, believes there is a better way to serve and protect children and their families utilizing a more family centered model of assessment.

SEVEN KEY STRATEGIES FOR THE FUTURE OF CHILD WELFARE IN NORTH CAROLINA

The breadth and anticipated impact of North Carolina's Multiple Response System distinguish it as unique among all other states' dual track / alternative response models. North Carolina's Multiple Response System is the nation's sole model of service provision specifically designed to result in profound systemic reformation through an integration of seven key strategies. The seven strategies of North Carolina's Multiple Response System constitute the basis for its reformation of children's services. North Carolina's seven strategies for system reform are:

- ❖ ***A strengths-based, structured intake process.*** The creation of objective, structured intake tools that clearly identify factors establishing consistent screening criteria for the identification of new child abuse, neglect, and dependency reports. Emphasis is placed on family strengths as well as needs. The structured intake tools include the Structured Intake Report Form, Maltreatment Screening Tools, and Response Priority Decision Tree.
- ❖ ***A choice of two approaches to reports of child abuse, neglect, or dependency.*** A system that allows a differential response to child neglect and dependency reports, and a partnership in child protection among county departments, families, other agencies, and local communities to address every aspect of child maltreatment and the family. The availability of two approaches recognizes the variation in the nature of reports and that one approach does not meet the needs of every family.
- ❖ ***Coordination between law enforcement agencies and child protective services for the investigative assessment approach.*** County Departments of Social Services work closely with law enforcement agencies through formalized mutually supportive relationships, especially when responding to reports of child maltreatment using the investigative assessment approach. This ensures that those who cause harm to children are identified and held responsible for their abusive actions through criminal prosecution.
- ❖ ***A redesign of in-home services.*** These are services provided due to concerns for safety and the future risk of harm to children. Families with the greatest needs are provided with the most intensive services and contacts, while families with fewer needs are provided with less intensive services/contacts. This continuum of services of working with families, allows social workers to better address risk, support the family and engage them in the process to promote planning and achieve positive change. In using this methodology, the three core outcomes of safety, permanence and well-being will be addressed within families being served through child protective services.
- ❖ ***Implementation of Child and Family Team meetings during the provision of in-home services.*** County Departments of Social Services use Child and Family Team meetings with families involved with child protective services. These meetings are a family-centered means of maximizing family input and decision making with support from the Department of Social Services, other community resources, and the family's own network of support. Agencies may use any commonly accepted Child and Family Team meeting model (Family Group Conferencing and Family Team Decision-Making are two of the best known) or devise their own.
- ❖ ***Implementation of Shared-Parenting meetings in child placement cases.*** County Departments of Social Services use shared parenting meetings with families who have had their children placed in foster care. Shared-Parenting meetings are a time for the social worker, birth parents and foster parents to meet and discuss the care of the child when out-of-home placement is necessary. These meetings occur within one week of a child's being placed in foster care.
- ❖ ***Collaboration between the Work First Family Assistance and child welfare programs.*** Work First Family Assistance is a program that provides families with financial, employment, and community services to help them become self-sufficient. Examples of Work First-related services and benefits include childcare, employment counseling, and transportation. Many families involved with the Work First program are also involved with child welfare cases. Under the Multiple Response System, child welfare and Work First programs in county departments of social services collaborate closely to serve children and families.